NEW YORK SUPPLEMENT TO THE ANNUAL STATEMENT FOR THE YEAR XXXX OF THE

CERTIFICATE OF COMPLIANCE

(Filed pursuant to requirements of Regulations No. 74 of the Department of Financial Services)

STATE OF)) SS:		
COUNTY OF) 33.		
			eing duly sworn
deposes and says tha	t (ne, sne) is the		of the
sales illustrations dis in all respects with tl	seminated by the insurer during th	preliminary information forms, policy benefit ne preceding statement year complied, or were wof the State of New York and the requiremen	made to comply,
Subscribed and swor	rn to before me this20		